

NEW HAMPSHIRE
DEPARTMENT OF

Environmental Services

NH5935435852

HAZARDOUS WASTE ACTIVITY NOTIFICATION FORM

1. ☒ First Notification

Provisional Identification Number (if applicable) _____

2. _____ Subsequent Notification

A. EPA Identification Number _____

B. Reason for change (e.g. name change, change in ownership, new waste streams, change in regulatory status): _____

C. Effective date of change: _____

3. Company Name: Environmental Soil Management, Inc.

4. Location Address: International Drive
Street

Loudon

Town

Merrimack

County

03301

Zip

5. Mailing Address: Rt 8 Box 934-2
Street

Concord

Town

NH

State

03301

Zip

6. Company's Principal Activity (brief description): the ~~main~~ Recycling of

non-haz soil by thermal remediation

7. SIC Code(s) _____

8. Name of Principal Contact: Lee Fox

title: General Manager

phone: (603) 783 0328

9. Name of legal company owner: Several stockholders

street address

city

state

zip

phone

10. Name of property owner: Environmental Soil Management, Inc

street address

city

state

zip

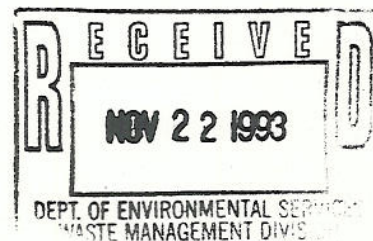
phone

NAME: Environmental Soil Mgmt

I.D. NO.: NH5986485852

FILE LOC: R-1A

OTHER: _____



11. Type of ownership (see instructions for appropriate code): P
12. Type of property ownership (see instructions for appropriate code): P
13. Type of regulated waste activity (enter X in all applicable spaces):

A. GENERATOR

(1) Generator Status:

- Small Quantity Generator (generation rate is less than 100 kgs/220 lbs per month)
- Full Quantity Generator of 100 to 1000 kg (220 lbs - 2200 lbs) per month
- Full Quantity Generator of greater than 1000 kg (2200 lbs) per month or greater than 1 kg (2.2 lbs) per month of an acutely hazardous waste
- Non RCRA or New Hampshire regulated only

(2) Description of hazardous wastes generated:

<u>Waste Name</u>	<u>EPA/State Waste Number</u>	<u>Estimated Monthly Volume</u>

B. TRANSPORTER

(1) Transportation Method:

 highway air rail water other specify

(2) List of Hazardous Wastes Transported:

<u>Waste Name</u>	<u>Waste Number</u>	<u>Waste Name</u>	<u>Waste Number</u>
-------------------	---------------------	-------------------	---------------------

C. X TREATMENT/STORAGE/DISPOSAL (TSD) FACILITY

(1) Type of Facility Activity

	<u>Waste generated on-site:</u>	<u>Waste received off-site:</u>
Storage	<u> </u>	<u> </u>
Treatment	<u> </u>	<u> </u>
Disposal	<u> </u>	<u> </u>
Other	<u> </u>	<u> </u>

We only receive non-hazardous waste

Requesting ID Number for ~~the~~ placing on manifests where waste may be considered a state hazardous waste

(2) Wastes Handled

Waste Description

EPA/State Waste Number

Non-haz petroleum contaminated soil

None

(3) Handling Methods

Pail storage, thermal treatment

D. TRANSFER FACILITY

E. MARKETER OR BURNER OF HAZARDOUS WASTE FUEL FOR ENERGY RECOVERY

 Fuel is burned on site (indicate type of combustion device)
utility boiler industrial boiler industrial furnace
 Fuel is marketed to another company for burning
 Fuel is marketed to another marketer

F. MARKETER OR BURNER OF OFF-SPECIFICATION USED OIL FUEL

 Fuel is burned on site (Indicate type of combustion device)
utility boiler industrial boiler industrial
furnace space heater (less than 0.5 million btu/hr)
 Fuel is marketed to another company(s) for burning
 Fuel is marketed to another marketer

G. MARKETER OR BURNER OF SPECIFICATION USED OIL FUEL ONLY

 Fuel is burned on site (indicate type of combustion device)
utility boiler industrial boiler industrial
furnace space heater (less than 0.5 million btu/hr)
 Fuel is marketed to another company(s) for burning
 Fuel is marketed to another marketer

14. CERTIFICATION: I hereby certify that the information provided herein is complete and accurate to the best of my knowledge. I understand that all information contained in this notification form can be disclosed to the public, according to the Freedom of Information Act, unless a claim of confidentiality is made in accordance with Env-Wm 213. I am authorized to sign official documents for my organization.

Lee Fox
Signature

Lee Fox General Manager
printed or typed name and title

11/12/93
date